

FEC FORM 9

24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

1. Individual, Organization or Qualified Nonprofit Corporation Making the Disbursement/Obligations

(a) Name

William Bean Kennedy, Jr

(b) Address (number and street)

☐ check if different than previously reported

1100 Rock Springs Rd

(c) City, State and ZIP Code

Vilas

NC

28692

(d) Name of Employer or Principal Place of Business

Self-employed

(e) Occupation

Carpenter & Farmer

2. FEC Identification Number

C C30001796

3. Is This Statement

☒

New

or

☐

Amended

4. Covering Period

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

through

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

5. (a) Date of Public Distribution(s)

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

(b) Communication Title

Radio/Cable Ads - Jobs, Corps., Seniors

6. The filer is a(n):

(a) ☒

Individual

(b) ☐

Unincorporated Organization

(c) ☐

Qualified Nonprofit Corporation (11 CFR 114.10)

(d) ☐

Corporation, Labor Organization or Qualified Nonprofit Corporation making communications under 11 CFR 114.15

(e) ☐

Other, specify: _____

7. Were the disbursements for the electioneering communication made exclusively from donations to a segregated bank account?

Yes ☒No ☐

8. Custodian of Records

(a) Name

Judith Anne Goodwin-Rosenberg

(b) Address (number and street)

220 Sorrento Forest Dr

(c) City, State and ZIP Code

Blowing Rock

NC

28605

(d) Name of Employer or Principal Place of Business

Not employed

(e) Occupation

Accountant

9. Total Donations This Statement

.00

10. Total Disbursements/Obligations This Statement

36681.10

Under penalty of perjury, I certify that this statement is true, correct and complete.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

Judith Anne Goodwin-Rosenberg

SIGNATURE Electronically Filed by Judith Anne Goodwin-Rosenberg

DATE 10/19/2010

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this statement to the penalties of 2 U.S.C. 437g.